#### CITY OF SALINA Human Resources Department

300 W. Ash, Room 200 Post Office Box 736 Salina, Kansas 67402-0736 PHONE 785-309-5710 FAX 785-309-5711 TDD 785-309-5747 www.salina-ks.gov

Date of Application

# Police Officer Application For Employment

No		Office Use Only	
	No		



We consider applicants for all jobs without regard to race, color, religion, sex, national origin, age, disability, or other legally protected status. Applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department. Applicants for certain specified positions must meet minimum response time requirements. Additional information is available from the Human Resources Department. The City of Salina conducts pre-employment drug testing.

Last Name		First Name	Middle Initial	Social Security	Number
List any other names by which	you are known or have been	employed.			
Mailing Address	Number	Street	City Sta	te Zip	Code
Telephone Numbers	(Home)	(Work)	Email Add	ress	
NOTE: Any candida BE disqualified from	n further considera	tion (before testing).		ent standards	WILL
<ul><li>a. Are you a United S</li></ul>	•	cations:	☐ Yes	□ No	
•		possess a GED equivalence	_	□ No	
c. Are you at least 21			☐ Yes	□ No	
·					
d. Do you have a valid	d driver's license?		☐ Yes	☐ No	
•	nas been rendered and co e or a discharge under h	ompleted, do you have an nonorable conditions?	☐ Yes	□ No	□ N/A
2. Have you been convic crime which is a felon Military Justice?	eted by any state or the f y or its equivalent under		☐ Yes	□ No	
3. Have you been convic		lent crimes during the			
preceding three (3) yes	ars:	Assault?	☐ Yes	□ No	
		Child Abuse?	☐ Yes	□ No	
		Sexual Abuse?	☐ Yes	□ No	
		Resisting Arre	st?	□ No	

4.	Do you have convictions, diversions, or expungements by any state or the federal government for the crime of domestic violence or its equivalent under the Uniform Code of Military Justice?	Yes	□ No
5.	Do you have convictions, diversions, or expungements of Driving Under the Influence or refusal during the preceding three (3) years?	☐ Yes	□ No
6.	Do you have multiple D.U.I./refusal convictions regardless of time period (to include diversion and expungement)?	☐ Yes	□ No
7.	Do you have more than three (3) moving traffic violations during the preceding three (3) years? (i.e., speeding, reckless driving, etc.).	☐ Yes	□ No
8.	Do you have moral charge convictions over the age of 18?	☐ Yes	□ No
9.	I understand that if I currently have debts serviced by collection agencies, it may result in disqualification.	Initia	1
10.	I understand candidates will be required to have and maintain good health and physical condition including an eyesight examination, will be conducted for top candidates at the City's expense. Ey the following: Both eyes 20/100, correctable to 20/20. Candidates who do not meet the visual acu the use of contact lenses as provided by an opthomologist or optometrist, in which case acuity mu with no upper limits. Candidates must display adequate binocular vision and color vision.	e sight require ity standards r st be correctal	ements are must employ ble to 20/20,
11.	I understand the following minimum standards involve illegal activities which, if I have committe same, will result in disqualification when discovered during the selection process.	Initia d and failed to	
	• Commission of moral crimes.		
	• Commission of property crimes during the preceding 2 years.		
	• Cocaine or opiates possession or use during the preceding 5 years.		
	• Steroid or marijuana possession or use during the preceding 12 months.		
	• Illegal possession or use of all other drugs during the preceding 2 years.		
	• Illegal sale or distribution of any narcotic or drug.		
	• Any undetected commission of felony crimes. Any information relative to criminal prosecution	will be made a	available to
	the proper jurisdiction.	Initia	
l d	applicant's Statement  Certify that answers given in this application are true and complete to the best of the complete background investigations, including but not limited to all statements contain the complete background investigations are true and complete to the best of the complete background investigations, including but not limited to all statements contain the complete background investigations, including but not limited to all statements contain the complete background investigations, including but not limited to all statements contain the complete background investigations. If I among the complete background investigations are true and complete to the best of the complete background investigations, including but not limited to all statements contain the complete background investigations.	my knowled tained in th employed l	ge. I authorize is application by the City of Salina
	pased on this application, I understand that false or misleading information given interview(s) may result in discharge.	n my applic	cation or

The City of Salina is a Drug Free / Equal Opportunity Employer

Date

Signature of Applicant

## **Equal Employment Opportunity Form**

The City of Salina has an equal opportunity affirmative action policy. Knowledge of your race, sex and age is necessary for monitoring the effectiveness of the program. Although you are not required to provide the information requested in this form, your cooperation is appreciated. This form is confidential and will be separated from your application immediately upon receipt.

Name:	Social S	Security #:		Date:
Position Applied for:				
Date of Birth:				
INSTRUCTIONS: Place your num	nbered answer to each qu	uestion in the	e space provided.	
A. What sex are you?	1. Male 2. Female	e		
B. Which Racial/Ethnic Grou	up do you consider yours	self a membe	er?	
	embers of Indian Tribes or are			ny of the original peoples of North arent or grandparent) or who are
2. ASIAN: All persons havin includes for example, China,				ia, the Indian subcontinent. This area
3. BLACK OR AFRICA	N AMERICAN: All pe	rsons having	origins in any of the	Black racial groups of Africa.
4. HISPANIC OR LATE	NO: All persons of Mexic	an, Puerto Rio	can, Cuban, Central o	r South American origin.
5. NATIVE HAWAIIAN of Hawaii, Guam, Samoa, or		C ISLAND	ERS: All persons ha	ving origins in any of the original people
6. WHITE: All persons hav	ring origins in any of the pe	eoples of Euro	ppe, including Spain,	North Africa, or the Middle East.
	RACES, (Not Hispanio Black, Native Hawaiian or V		: All persons having	two or more origins categorized as
C. How did you learn about t	this job?	7.	Job Service	
1. Job Notice (Posted in F	Human Resources Dept.)	8.	<b>Human Relations</b>	Department Notice
2. From a Present City En	Name of Paralamen	9.	Radio	
3. As a Current City Emp	loyee		School/University	
4. Salina Journal			Professional Publ	cation
5. Other Newspaper			City Website	_
6. Salina Cable Ch. 20		1.3.	Other Internet Sit	<u>.</u>



#### **Veteran's Preference Notice**

In accordance with K.S.A. 73-201, the City of Salina offers veterans preference in the initial hiring and first promotion of veterans in classified positions if competent to perform those positions. Veterans Preference will not be given to positions filled by elections, or for City Manager, city management or department heads, temporary or seasonal positions, or for any other position exempted from the preference by state law.

A veteran must request the preference by submitting the Veteran's Preference Eligibility Request form and supporting documentation, along with the Employment Application, to the Human Resources Dept. when applying for an open position.

In determining competency to perform the position, the hiring authority will make a good faith determination that the person is likely to successfully meet the performance standards of the position based on what a reasonable person knowledgeable in the operation of the position would conclude from all information available at the time the decision is made. The basis for such determination shall include experience, training, education, licensure, certification and/or other factors deemed appropriate to determine overall qualification and ability to successfully meet the performance standards of the position. The Human Resources Director or a designee shall document such factors prior to the initiation of the selection process.

Any veteran qualifying for the preference shall not be disqualified from holding any position in such service on account of age or by reason of any physical or mental disability, as long as age or disability does not render the veteran incompetent to perform the duties of the position in which he or she applied. In the event a veteran eligible for the preference, is not hired for the position, the Human Resources Director or a designee shall notify the veteran by certified mail or personal service within thirty (30) days of filling the position.

If a veteran believes that the City has not provided the veteran's preference as required by law, he or she may complete an appeal form, included in the written notification and submit it to the Human Resources Department. The appeal form must be submitted to the Human Resources Department within ten (10) days of receiving the written notification. Upon receipt of the written appeal, the Human Resources Director or a designee will meet with at least two City of Salina Affirmative Action Committee members to review the appeal. Within five (5) days of holding the review meeting, the Affirmative Action Committee will submit a written determination to the veteran.



#### **Veteran's Preference Notice**

Pursuant to K.S.A. 73-201(c), Veterans shall be preferred for initial employment and first promotion in the state government of Kansas, and in the counties and cities of this state, if competent to perform such services. Any veteran thus preferred shall not be disqualified from holding any position in such service on account of the veteran's age or by reason of any physical or mental disability as long as such age or disability does not render the veteran incompetent to perform the duties of the position applied for. When any veteran shall apply for appointment to any such position, place, or employment, the officer, board or person whose duty it is or may be to appoint a person to fill such place shall, if the applicant be a veteran of good reputation, and can competently perform the duties of the position applied for by the veteran, consider the veteran for appointment to such position, place or employment.

In the event an eligible veteran is not hired for a position in which he or she has applied,

notification will be sent within 30 days by certified mail or personal servi will advise the veteran of an administrative appeal process.	ce. Suc	n notic
To determine eligibility, please answer the following questions:	Yes	No
I entered the armed forces before Oct. 15, 1976, and separated from the armed forces under honorable conditions. I served i) on active duty during any war (official dates for war service are 4/6/1917 - 7/2/1921 and 12/7/1941 - 4/28/1952); ii) during the period 4/28/1952 - 7/1/1955; iii) in any campaign or expedition for which a campaign badge or service medal has been authorized; or iv) for more than 180 consecutive days since 1/31/1955 but prior to 10/15/1976, excluding an initial period of active duty for training under the "six month" reserve or national program.		
I entered the armed forces on or after 10/15/1976 and separated from the armed forces under honorable conditions and was awarded a service medal or campaign badge.		
I separated from the armed forces under honorable conditions and have a disability certified by the U.S. Dept. of Veterans Affairs as being service connected, have been issued the purple heart by the U.S. government, or have been released from active service with a service-connected disability.		
I am the spouse of a veteran who has a 100% service connected disability as determined by the U.S. Dept. of Veteran Affairs.		
I am the spouse of a veteran who died while and as a result of service in the armed forces and have not remarried.		
I am the spouse of a prisoner of war, as defined by K.S.A. 75-4364 and amendments thereto.		
If you marked "Yes" on any of the above questions and desire to use Preference, please sign and date this form and submit to Human R with a copy of your DD214 form or the DD214 for of the veteran under you qualify.	esourc	es alo
Name:		
Signature: Date	:	
Office Use Only: Position Applied for: Oircle one:  Date  Sont Notification (Date:	e Rec'd: _	

### APPLICANT BACKGROUND QUESTIONNAIRE

If you stated on your City of Salina Application for Employment that you have been convicted of a felony within the last seven (7) years, please complete this form. A felony will not necessarily be a ban to employment. In order for your application to be considered further, the following information is needed for each felony you have been convicted of within the last seven (7) years.

Date of Conviction		Your Age at Conviction	
Felony Description (Please go into some detail)			
Where Convicted (Court Location)			
Length of Your Sentence Served			
Are you currently on probation or parole?			
If yes, please provide name and phone number of your probation or parole officer.			
	Applicant	's Signature	
	——————————————————————————————————————		